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2013 JAN 18 AM 8: 40

FEC MAIL CENTER

Committee Name:
Start UP America SuperPAC
If registered, FEC ID:
Today's Date:
1/10/2013
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463
Re: Form 1, Statement of Organization—Unlimited Contributions
To Whom It May Concern:
This committee intends to make independent expenditures, and consistent with
the U.S. Court of Appeals for the District of Columbia Circuit decision in
SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. The
committee will not use those funds to make contributions, whether direct, in-kir
or via coordinated communications, to federal candidates or committees.
or via bootamated communications, to read at candidates of communications.
Respectfully submitted,
Aley Folling
Treasurer's Name:
Alex Goeffing Treasurer

30310131

FEC FORM 1

STATEMENT OF **ORGANIZATION**

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2013 JAN 18 AM 8: 40 Office Use Only

1. NAME OF COMMITTEE (in full)		(Check if name s changed)		nple:If typing, type the lines.	12FE4M	JE-CENTER
Start Up Hi	112171.	1CIAI 15-16-1	plat-	ALE SUIP	e15/PAIC	
ADDRESS (number and street)	2,5,3	10, S., 1A	MAINI	ya ilmne		
(Check if address is changed)	L					
	CUM	IF VIENT	de		STATE A	[\$ 6 3 22]-[
COMMITTEE'S E-MAIL ADDRES	SS					
(Check if address is changed)	Sitia	1717101PIA	Meiri	ا داها ک الا الحالا	PHICH	Mail COM
		Second E-Mail		•	J	
COMMITTEE'S WEB PAGE ADD (Check if address is changed)	•	•		11871-1601C	CIMIII.	
2. DATE	o a	013				
3. FEC IDENTIFICATION NUMBER ▶						
4. IS THIS STATEMENT	NEW	(N) OR		AMENDED (A)		
I certify that I have examined th	is Statem	ent and to the b	est of my k	nowledge and belief it	is true, correc	et and complete.
Type or Print Name of Treasurer	Al	ex Gie	Hina	-		
Signature of Treasurer M. M						
				ject the person signing to		to the penalties of 2 U.S.C. §437g.
Office Use Only				For further Information of Federal Election Commissin Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

5.

		OMMITTEE Committee:
(a)	77	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	(11)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name Cand		1960
Cand Party	idate Affiliati	Office State on Sought: House Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Cand		
Pari	y Con	mittee:
(d)		(National, State (Democratic, or subordinate) committee of the Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):
(e)	64 110 1 1 100 1	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		lu addition, this committee is a Lobbyist/Registraot PAC.
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Join	 t Fund	raising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political
(h)	¥-4	committees/organizations, at least one of which is an authorized committee of a fodoral candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political
(-7	0.3	committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC ID number C
	3.	
		Tributation Carather the Control of the Control
	4.	

Page 3

ZIP CODE

Telephone number

	Title or Position	CITY	STATE	ZIP CODE
			Telephone number	
8.	Treasurer: List the name any designated agent (e.g.	and address (phone number optional) g., assistant treasurer).	of the treasurer of the committee	e; and the name and address of
	Full Name of Treasurer	cixiginidies, Jiosicyph	Gaztting.	
	Mailing Address	12,5,3,0, S, Hunayia	YIGI I MANZIII	
		Ciampi Viertidiei i		186322-
	Title or Position	CITY	STATE	ZIP CODE

Title or Position

M M 0 H O M

FEC Form 1 (Re	evised 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position		Telephone number	
Banks or Other Depos safety deposit boxes or Name of Bank, Deposit		ich the committee deposits f	unds, holds accounts, rents
W.	2/1/5 Fargo		
Mailing Address	LGSO NIFITAMINE IF	liaitis ird	
	Camp Vierride	14-Z	[86359]-
	CITY	STATE	ZIP CODE
Name of Bank, Deposit	tory, etc.		
L.			
Mailing Address		11111111	
	CITY	STATE	ZIP CODE

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** 1/11/13 Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

(3/2005)

PREPARER